



# State of New Hampshire 2009 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2009

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE  
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 04/01/2009

Business ID: 282345

William M. Gardner

Secretary of State

JAMIE N. HAGE, P.C.

900 ELM STREET

MANCHESTER, NH 03101-2031

## ADDRESS OF PRINCIPAL OFFICE:

C/O NIXON PEABODY LLP, 900 ELM STREET

MANCHESTER, NH 03101

## REGISTERED AGENT AND OFFICE:

HAGE, JAMIE N, ESQ

HAGE HODES PA, 440 HANOVER STREET

MANCHESTER, NH 03104

ENTITY TYPE: PROFESSIONAL CORPORATION

BUSINESS ID: 282345

STATE OF DOMICILE: NEW HAMPSHIRE

PROFESSIONAL LEGAL SVCS THROUGH THE GENERAL PRACTICE  
OF LAW

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☒ The new mailing address 440 Hanover Street, Manchester, NH 03104

☒ The new principal office address C/O Hage Hodes, PA, 440 Hanover Street, Manchester, NH 03104

PO Box is acceptable.

## OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. Jamie N. Hage  
STREET C/O Hage Hodes, PA, 440 Hanover Street  
CITY/STATE/ZIP Manchester NH 03104

TREAS. Jamie N. Hage  
STREET C/O Hage Hodes, PA, 440 Hanover Street  
CITY/STATE/ZIP Manchester NH 03104

SEC'Y. Jamie N. Hage  
STREET C/O Hage Hodes, PA, 440 Hanover Street  
CITY/STATE/ZIP Manchester NH 03104

NAME .....  
STREET .....  
CITY/STATE/ZIP .....

## BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Jamie N. Hage  
STREET C/O Hage Hodes, PA, 440 Hanover Street  
CITY/STATE/ZIP Manchester NH 03104

NAME .....  
STREET .....  
CITY/STATE/ZIP .....

NAME .....  
STREET .....  
CITY/STATE/ZIP .....

NAME .....  
STREET .....  
CITY/STATE/ZIP .....

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

To be signed by an officer, director, or any other person authorized by the board of directors.

I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

All the shareholders, and as many of the directors and officers as may be required under RSA 294-A:20, are qualified persons with respect to the corporation.

Sign here: Jamie N. Hage

Please print name and title of signer: Jamie N. Hage / PRESIDENT

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL): \_\_\_\_\_



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WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A  
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE  
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529